

EXHIBIT 10  
UNITED STATES BANKRUPTCY COURT  
FOR THE WESTERN DISTRICT OF MICHIGAN  
110 Michigan St., NW  
Grand Rapids, MI 49501

Debtor:

NAME.....  
ADDRESS.....  
CITY, ST ZIPCODE

Case Number: \_\_\_\_\_

SEMI-ANNUAL REPORT ON CONFIRMED PLAN

1. On the date of this report have you paid all administrative expenses required to be paid at this date by the Plan of Reorganization?

( ) Yes  
( ) No Please explain if no.

2. On the date of this report have you paid all the priority taxes required to be paid at this date by the Plan of Reorganization?

( ) Yes  
( ) No Please explain if no.

3. On the date of this report, is the plan substantially consummated? (See 11 U.S.C. 1101(2))

( ) Yes  
( ) No

4. If you are not yet ready to request a final decree in this case, please state with specificity those actions which must be taken before you will request a decree.

DUE ON OR BEFORE \_\_\_\_\_.

#####  
# THIS CASE MAY QUALIFY FOR #  
# CLOSING. #  
# CONTACT YOUR ATTORNEY OR CALL #  
# 616-456-2016 FOR MR. ROBINSON. #  
# ONLY CLOSING WILL STOP U.S. #  
# TRUSTEE PAYMENTS. #  
#####

Name: \_\_\_\_\_

Agent: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_